

**ATTACHMENT 1
TECHNICAL PROPOSAL**

Instructions: See Item No. 11, remarks, if extra space is needed to answer any item below. Mark X in the appropriate boxes.

1. Contractors Name, Address & Telephone No.

2. Type of Business

☐ Company ☐ Co-Partner

☐ Corporation ☐ Individual

☐ Non-profit

email address: _____

3. How many years' experience do you have in this line of work _____ Years

4. How many years' experience as a prime contractor _____ subcontractor _____

5. List the relevant current/past projects for your business in the last 3 years:

a. Project (Location): _____

Contract Amount \$ _____ Period of Performance _____

Description of Services (i.e. type of road, length of road, equipment used, tasks performed, trades involved)

Name, Address & Telephone Number for Point of Contact for Information:

b. Project (Location): _____

Contract Amount \$ _____ Period of Performance _____

Description of Services (i.e. type of road, length of road, equipment used, tasks performed, trades involved)

Name, Address & Telephone Number for Point of Contact for Information:

c. Project (Location): _____

Contract Amount \$ _____ Period of Performance _____

Description of Services (i.e. type of road, length of road, equipment used, tasks performed, trades involved)

Name, Address & Telephone Number for Point of Contact for Information:

McRiver Stewardship Project
(SUBMIT WITH BID FORM)

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6. A plan of operation for both timber removal and stewardship project work, including a timeline and the rationale for work activities to ensure all contractual work will be completed by the termination date. Please include the timing of units to be cut in accordance with the cutting schedule.

AT.13 - Normal Operating Season, applicable to GT.3.1, GT.6.6, IT.2.1, and JT.3

Operating Season: June 15 to March 15 , inclusive

Period Covered: 09/22/2020 to 07/05/2025

Payment Unit 2:	Start Date:	Completion Date:
Payment Unit 3:	Start Date:	Completion Date:
Payment Unit 4:	Start Date:	Completion Date:
Payment Unit 5:	Start Date:	Completion Date:
Payment Unit 6:	Start Date:	Completion Date:
Payment Unit 7:	Start Date:	Completion Date:

Payment Unit 8:	Start Date:	Completion Date:
Payment Unit 9:	Start Date:	Completion Date:
Payment Unit 10:	Start Date:	Completion Date:
Payment Unit 11:	Start Date:	Completion Date:
Payment Unit 13:	Start Date:	Completion Date:
Payment Unit 14:	Start Date:	Completion Date:

Stewardship Item SP1: Pre-haul Activities FS 529C - 1.0 miles

7. A quality control plan for both the harvesting and the stewardship projects. Specifically address frequency of inspections and inspection procedures.

Timber Harvesting:	Type of Inspection:		Frequency of Inspection:			
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Remarks:

Stewardship Projects:

Type of Inspection:

Frequency of Inspection:

Remarks:

8. Geographical Proximity.

The Contractor's main office is located

miles from

Aurora, MN.

Contractor's work force is located within

miles from

Aurora, MN.

9 List the experience of the principal individuals of your business.

INDIVIDUALS NAME	PRESENT POSITION	YRS EXP	TYPE OF WORK

CERTIFICATION: I certify that all of the statements made by me are complete and correct to the best of my knowledge and that any persons named as references are authorized to furnish the Forest Service with any information needed to verify my capability to perform this project:

Name:	Title:	Date: